

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007879

FILED
Aug 17, 2004
Secretary of State**Entity Name:** SOUTH FLORIDA GOSPEL NETWORK FOR THE PERFORMING ARTS, INC.**Current Principal Place of Business:**1022 PARK HILL DR
W PALM BEACH, FL 33417**New Principal Place of Business:****Current Mailing Address:**1022 PARK HILL DR
W PALM BEACH, FL 33417**New Mailing Address:**P.O. BOX 223164
W PALM BEACH, FL 33422**FEI Number:** 02-0702761**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WILLIAMS, RENFORD E
1022 PARK HILL DR
W PALM BEACH, FL 33417**Name and Address of New Registered Agent:**WILLIAMS, RENFORD E DIRECTO
P.O. BOX 223164
W PALM BEACH, FL 33422

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: RENFORD E. WILLIAMS

08/17/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: WILLIAMS, RENFORD E
Address: 1022 PARK HILL DR
City-St-Zip: W PALM BEACH, FL 33417**Title:** DVT () Delete
Name: WILLIAMS, MICHELLE A
Address: 1022 PARK HILL DR
City-St-Zip: W PALM BEACH, FL 33417**Title:** DS () Delete
Name: BLAIR, NOVIA C
Address: 1022 PARK HILL DR
City-St-Zip: W PALM BEACH, FL 33417**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: WILLIAMS, RENFORD E
Address: P.O. BOX 223164
City-St-Zip: W PALM BEACH, FL 33422**Title:** DVT (X) Change () Addition
Name: WILLIAMS, MICHELLE A
Address: P.O. BOX 223164
City-St-Zip: W PALM BEACH, FL 33422**Title:** DS (X) Change () Addition
Name: BLAIR, NOVIA C
Address: P.O. BOX 223164
City-St-Zip: W PALM BEACH, FL 33422

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENFORD E. WILLIAMS

DP

08/17/2004

Electronic Signature of Signing Officer or Director

Date